Fill in this information to identify your case:		
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself			
			About Debtor 1:	A	bout Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar licer Bring iden	e the name that is on government-issued ure identification (for mple, your driver's ase or passport). g your picture tification to your ting with the trustee.	RAFAEL First name MONSERRATE Middle name CARO ADORNO Last name and Suffix (Sr., Jr., II, III)	Fi E M	IARIA irst name ESTHER Iddle name EANCEL RODRIGUEZ ast name and Suffix (Sr., Jr., II, III)
2.	Inclumation assumed as the second as the second and sec	other names you have d in the last 8 years and your married or den names and any umed, trade names and g business as names. NOT list the name of separate legal entity in as a corporation, mership, or LLC that is filling this petition.			
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-4379	X	xx-xx-1954

Debtor 1
Debtor 2
PAFAEL MONSERRATE CARO ADORNO
MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Your Employer Identification Number (EIN), if any.		EIN	EIN		
5. Where you live		PARCELA 273B CALLE FLAMBOYAN Sabana Seca, PR 00952	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code Toa Baja	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. PO BOX 1018	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Sabana Seca, PR 00952 Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1
Debtor 2
Parallel MONSERRATE CARO ADORNO
MARIA ESTHER CANCEL RODRIGUEZ
Case number (if known)

7.	The chapter of the Bankruptcy Code you are				ch, see <i>Notice Required by</i> 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	
	choosing to file under		Chapter 7				
			Chapter 11				
			Chapter 12				
		\boxtimes	Chapter 13				
8.	How you will pay the fee		about how yo	u may pay. Typically, attorney is submitting	ntire fee when I file my petition. Please check with the clerk's office in your local court for more details may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money torney is submitting your payment on your behalf, your attorney may pay with a credit card or check with dress.		
					ents. If you choose this option	on, sign and attach the Application for Individuals to Pay	
			The Filing Fe	e in Installments (Offi	cial Form 103A).		
			but is not requal applies to you	uired to, waive your four four four four family size and you	ee, and may do so only if your are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	⊠ N □ Y					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	M ⊠ Y □					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor	-		Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	⊠ N					
		□ Y	′		an eviction judgment agains	st you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial St</i> this bankruptcy petit		Judgment Against You (Form 101A) and file it as part of	

Debtor 1 RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ Debtor 2 Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ⊠ No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B) debtor or a debtor as defined by 11 U.S. C. § ☑ No. I am not filing under Chapter 11. 1182(1)? I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy For a definition of small ☐ No. business debtor, see 11 U.S.C. § 101(51D). Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. ☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ⊠ No. property that poses or is Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is immediate attention? needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed.

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

Debtor 1 Debtor 2

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 RAFAEL MONSERRATE CARO ADORNO Debtor 2 MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)	
Case Hullibel (II kriowii)	

חפט	IOI 2 INAINA LOTTILIN O	ANOLLIN	OBINIOULE	-	Od3C Hu	
Part 6: Answer These Questions for Reporting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurre individual primarily for a personal, family, or household purpose."			defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
				arily business debts? Busin or investment or through the		ebts that you incurred to obtain business or investment.
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts	you owe that are not consul	mer debts or bus	siness debts
17.	Are you filing under Chapter 7?	⊠ No.	I am not filing under Chapter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			ter 7. Do you estimate that at be available to distribute to		property is excluded and administrative expenses tors?
	administrative expenses		□ No			
	are paid that funds will		☐ Yes			
	be available for distribution to unsecured					
	creditors?					
18.	How many Creditors do	☑ 1-49			1	<u>25,001-50,000</u>
10.	you estimate that you	☐ 50-99		5001-10,000		50,001-100,000
	owe?	100-19		□ 10,001-25,0	00	☐ More than100,000
		200-99	9			
19.	How much do you	⊠ \$0 - \$5	0,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to		1 - \$100,000		1 - \$50 million	\$1,000,000,001 - \$10 billion
	be worth?		01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
			·			
20.	How much do you estimate your liabilities		0,000 01 - \$100,000	□ \$1,000,001 · □ \$10,000,001		☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion
	to be?		01 - \$100,000	☐ \$10,000,001 ☐ \$50,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			01 - \$1 million		1 - \$500 million	
Part	:7: Sign Below					
For	you	I have exa	ımined this petition, an	d I declare under penalty of բ	perjury that the i	nformation provided is true and correct.
		If I have c	hosen to file under Cha	apter 7. I am aware that I ma	v proceed, if elic	gible, under Chapter 7, 11,12, or 13 of title 11,
		United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a					
		bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		/s/ RAFAEL M. CARO ADORNO /s/ MARIA E. CANCEL RODRIGUEZ				
		RAFAEL MONSERRATE CARO ADORNO Signature of Debtor 1 MARIA ESTHER CANCEL RODRIGUEZ Signature of Debtor 2				
	Executed on July 31, 2023 Executed on July 31, 2023					
			MM / DD / YYYY	_		MM / DD / YYYY

Debtor 1	RAFAEL MONSERRATE CARO ADORNO	
Debtor 2	MARIA ESTHER CANCEL RODRIGUEZ	

Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Milagros Rivera Rivera	Date	July 31, 2023
Signature of Attorney for Debtor		MM / DD / YYYY
Milagros Rivera Rivera		
Printed name		
MILAGROS RIVERA		
Firm name		
PO Box 50823		
Toa Baja, PR 00949		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	Icda.riveramilagros@gmail.com
PR		
Bar number & State		

Fill	in this information to identify your case:		
De	otor 1 RAFAEL MONSERRATE CARO ADORNO		
Do	First Name Middle Name Last Name otor 2 MARIA ESTHER CANCEL RODRIGUEZ		
	use if, filing) First Name Middle Name Last Name		
Un	ted States Bankruptcy Court for the: DISTRICT OF PUERTO RICO		
	se number		Check if this is an
		;	amended filing
	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Informatio		12/15
info	is complete and accurate as possible. If two married people are filing together, both are equally responsib rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing am r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Pa	t 1: Summarize Your Assets		
			our assets alue of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	ç	\$ 0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		100,112.00
	1c. Copy line 63, Total of all property on Schedule A/B		100,112.00
D-		4	100,112.00
Pa	t 2: Summarize Your Liabilities		
			our liabilities mount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		·
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule L) \$	65,304.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	§	\$ 2,250.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	\$78,079.46
	Your total liabilit	ies \$_	145,633.46
Da	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,176.36
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	Q	\$ 2,986.36
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with	າ your oth	ner schedules.
7.			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	or a perso	onal, family, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check t	his box a	nd submit this form to the
Off	court with your other schedules. cial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information		page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,318.63

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
9g. Total. Add lines 9a through 9f.	\$

Fill in	this infor	mation to identify your case a	and this filing:		
Debto	or 1	RAFAEL MONSERRAT	E CARO ADORNO		
		First Name	Middle Name Last Name		
Debto	or 2 e, if filing)	MARIA ESTHER CANO	EL RODRIGUEZ Middle Name Last Name		
Ороизс	2, II IIIIIg)	i iist ivaine	Windle Name Last Name		
United	d States Ba	ankruptcy Court for the: DIST	RICT OF PUERTO RICO		
Case	number				☐ Check if this is an
					amended filing
Offi∂	cial Fo	orm 106A/B			
<u>Scr</u>	<u> 1eaui</u>	e A/B: Propert	y		12/15
informa	ation. If mor r every que:	e space is needed, attach a sepa stion.	possible. If two married people are filing together, both a rate sheet to this form. On the top of any additional page , or Other Real Estate You Own or Have an Interest In		
T WILL I	Describe	Lucii itesiaenee, Bunanig, Luna,	, of Other Near Estate Fou Own of Have an interest in		
1. Do	you own or	have any legal or equitable inter	est in any residence, building, land, or similar property?		
⊠N	o. Go to Par	t 2.			
☐ Y	es. Where	is the property?			
Part 2:	Describe	Your Vehicles			
			interest in any vehicles, whether they are registe report it on Schedule G: Executory Contracts and Ui		ehicles you own that
SUITIEU	ile else ull	ves. Il you lease a verilole, also	report it on <i>Schedule G. Executory Contracts and Ol</i>	lexpileu Leases.	
3. C a	ırs, vans, t	trucks, tractors, sport utility v	vehicles, motorcycles		
	No				
⊠ Y	es/es				
3.1	Make:	INDIAN	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	CHALLENGER	☑ Debtor 1 only	Creditors Who Have Clair	
	Year:	2022	☐ Debtor 2 only	Current value of the	Current value of the
	Approxima	te mileage: 5000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Г	Other infor	mation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$29,522.00	\$29,522.00
3.2	Make:	CHEVROLET	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	TRAX	☐ Debtor 1 only	Creditors Who Have Clair	
	Year:	2019	☐ Debtor 2 only	Current value of the	Current value of the
	Approxima	te mileage: 18000	☑ Debtor 1 and Debtor 2 only	entire property?	portion you own?
г	Other infor	mation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$22,222.00	\$22,222.00

Official Form 106A/B Schedule A/B: Property page 1

		RAFAEL MONSERRATE (MARIA ESTHER CANCEL		Case number (if known)	
3		NISSAN MURANO 2022 ximate mileage: 2637 nformation:	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: re Claims Secured by Property. the Current value of the portion you own?
			Check if this is community property (see instructions)	\$48,368	.00 \$48,368.00
l I			Vs and other recreational vehicles, other vehicles, al watercraft, fishing vessels, snowmobiles, motorcycle		
5			u own for all of your entries from Part 2, including a rite that number here		\$100,112.00
Pa	rt 3: Desc	ribe Your Personal and Househ	old Items		
			le interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examples ☑ No	old goods and furnishings : Major appliances, furniture, lin Describe	nens, china, kitchenware		
7.	⊠ No		, video, stereo, and digital equipment; computers, print as, media players, games	ers, scanners; music co	ollections; electronic devices
8.	Examples ☑ No	les of value : Antiques and figurines; painting other collections, memorabilis Describe	ngs, prints, or other artwork; books, pictures, or other a a, collectibles	art objects; stamp, coin,	or baseball card collections;
9.	Equipme	nt for sports and hobbies	e, and other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes a	and kayaks; carpentry tools;
10.	Firearm		munition, and related equipment		
11.	Yes.		ner coats, designer wear, shoes, accessories		
12.	No Yes. ☐ Yes.	Describe			
	Example No		ewelry, engagement rings, wedding rings, heirloom jev	velry, watches, gems, g	old, silver
13.	<i>Example</i> ⊠ No	m animals s: Dogs, cats, birds, horses Describe			

Official Form 106A/B Schedule A/B: Property

page 2

	btor 1 btor 2	MARIA ESTHER CANCEL RODRIGUEZ	Case number (if known)	
4.4	A			
[⊠ No	ther personal and household items you did not already list, including	g any health aids you did not list	
[☐ Yes.	Give specific information	_	
15.		he dollar value of all of your entries from Part 3, including any entrieart 3. Write that number here		\$0.00
Par	t 4: Dos	scribe Your Financial Assets	_	
		n or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
[⊠ No É	oles: Money you have in your wallet, in your home, in a safe deposit box, a	and on hand when you file your petitio	n
_		sits of money oles: Checking, savings, or other financial accounts; certificates of deposit, institutions. If you have multiple accounts with the same institution, lis		ouses, and other similar
	_	Institution name:		
	<i>Examp</i> ⊠ No	s, mutual funds, or publicly traded stocks les: Bond funds, investment accounts with brokerage firms, money marke	et accounts	
[and jo i ⊠ No	sublicly traded stock and interests in incorporated and unincorporate int venture Give specific information about them		in an LLC, partnership,
		Name of entity:	% of ownership:	
[Negotia Non-ne ⊠ No	rnment and corporate bonds and other negotiable and non-negotiable able instruments include personal checks, cashiers' checks, promissory negotiable instruments are those you cannot transfer to someone by signing Give specific information about them	otes, and money orders.	
		Issuer name:		
[<i>Examp</i> ⊠ No	ment or pension accounts bles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings account List each account separately.	ts, or other pension or profit-sharing p	lans
		Type of account: Institution name:		
	Your sh	ity deposits and prepayments hare of all unused deposits you have made so that you may continue serv oles: Agreements with landlords, prepaid rent, public utilities (electric, gas,		es, or others
		Institution name or in	dividual:	
	Annuit ⊠ No	ties (A contract for a periodic payment of money to you, either for life or for	or a number of years)	
	Yes	Issuer name and description.		
		is in an education IRA, in an account in a qualified ABLE program, or C. §§ $530(b)(1)$, $529A(b)$, and $529(b)(1)$.	under a qualified state tuition prog	ıram.
	Yes	Institution name and description. Separately file the records	s of any interests.11 U.S.C. § 521(c):	
[⊠ No	s, equitable or future interests in property (other than anything listed Give specific information about them	in line 1), and rights or powers exe	rcisable for your benefit

	ebtor 1 ebtor 2	RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ	Case number (if known)	
	Example No	s, copyrights, trademarks, trade secrets, and other intellectual properties: Internet domain names, websites, proceeds from royalties and licensing Give specific information about them		
27.	_Examp	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdings, l	iquor licenses, professional licenses	
	⊠ No □ Yes.	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	⊠ No	funds owed to you Give specific information about them, including whether you already filed the	e returns and the tax years	
	⊠ No [′]	support /es: Past due or lump sum alimony, spousal support, child support, mainten Give specific information	ance, divorce settlement, property se	ttlement
	<i>Examp</i> i ⊠ No	amounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick payments; unpaid loans you made to someone else Give specific information	ay, vacation pay, workers' compens	ation, Social Security
31.	<i>Example</i> No	Its in insurance policies les: Health, disability, or life insurance; health savings account (HSA); credit lame the insurance company of each policy and list its value.	t, homeowner's, or renter's insurance	
		Company name:	Beneficiary:	Surrender or refund value:
	If you a someor ⊠ No	terest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance pole has died. Give specific information	icy, or are currently entitled to receive	e property because
33.	Example ☑ No	against third parties, whether or not you have filed a lawsuit or made les: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payment	
34.	⊠ No	contingent and unliquidated claims of every nature, including counter Describe each claim	claims of the debtor and rights to s	set off claims
35.	⊠ No	nancial assets you did not already list Give specific information		
36	S. Add th	ne dollar value of all of your entries from Part 4, including any entries from Part 4. Write that number here		\$0.00
Pa	rt 5: Des	cribe Any Business-Related Property You Own or Have an Interest In. List any r	eal estate in Part 1.	
	Do you o	own or have any legal or equitable interest in any business-related property? to Part 6.		

Official Form 106A/B Schedule A/B: Property page 4

Yes. Go to line 38.

Deb Deb	tor 1 RAFAEL MONSERRATE CARO ADORNO tor 2 MARIA ESTHER CANCEL RODRIGUEZ		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46.	Do you own or have any legal or equitable interest in any fara ☑ No. Go to Part 7. ☑ Yes. Go to line 47.	m- or commercial fishi	ing-related property?	
Part	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
Σ	Do you have other property of any kind you did not already li Examples: Season tickets, country club membership No Yes. Give specific information	ist?		
54.	Add the dollar value of all of your entries from Part 7. Write t List the Totals of Each Part of this Form	hat number here		\$0.00
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$100,112.00	-	
57.	Part 3: Total personal and household items, line 15	\$0.00		
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$100,112.00	Copy personal property total	\$100,112.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62		_	\$100,112.00

Official Form 106A/B Schedule A/B: Property page 5

							_	
Fil	l in this inforr	nation to identify your case	:					
De	ebtor 1	RAFAEL MONSERRA						
Do	ebtor 2	First Name MARIA ESTHER CAN	Middle Name	L	ast Name			
	ouse if, filing)	First Name	Middle Name	L	ast Name			
Un	nited States Ba	nkruptcy Court for the: DI	STRICT OF PUERTO RIC	co				
Ca	se number							
(if k	known)							Check if this is an amended filing
O:	fficial Fo	rm 106C						
		e C: The Prop	erty You Cla	im	as Ex	empt		
4/2		•				•		
the nee	property you li	nd accurate as possible. If tw sted on Schedule A/B: Prope d attach to this page as many nown).	rty (Official Form 106A/B)	as yo	ur source, lis	t the property that you	claim as ex	cempt. If more space is
spe any fun exe	ecific dollar ar applicable stands ds—may be usemption to a p	property you claim as exer nount as exempt. Alternativ tatutory limit. Some exempt inlimited in dollar amount. I articular dollar amount and statutory amount.	vely, you may claim the ficions—such as those for However, if you claim an	full fa r heal 1 exer	ir market val th aids, right option of 100	ue of the property be s to receive certain I)% of fair market valu	eing exemp benefits, an ue under a	ted up to the amount of and tax-exempt retirement law that limits the
		fy the Property You Claim a	s Exempt					
1.	Which set of	exemptions are you claim	ng? Check one only, eve	n if yo	ur spouse is	filing with you.		
	_	aiming state and federal non		•	, J.S.C. § 522(I			
	⊠ You are c	aiming federal exemptions.	11 U.S.C. § 522(b)(2)					
2.	For any prop	perty you list on Schedule A	N/B that you claim as exc	empt,	fill in the inf	ormation below.		
		on of the property and line on that lists this property	Current value of the portion you own	Am	ount of the exc	emption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one bo	x for each exemption.		
		N CHALLENGER 5000	\$29,522.00	\boxtimes		\$12,580.00	11 U.S.0	C. § 522(d)(5)
	miles Line from Sci	hedule A/B: 3.1				r market value, up to ble statutory limit		
3.	(Subject to ac ☑ No ☐ Yes. Dic ☐ N	ming a homestead exemptidjustment on 4/01/25 and events and events are acquire the property control of the cont	ery 3 years after that for ca	ases f		•	ŕ	

Fill in this information to identify	Work case.			
Debtor 1 RAFAEL MO First Name	NSERRATE CARO ADORNO Middle Name Last Name		-	
	ER CANCEL RODRIGUEZ			
Debtor 2 (Spouse if, filing) MARIA ESTH First Name	Middle Name Last Name		-	
United States Bankruptcy Court for	the: DISTRICT OF PUERTO RICO			
Crimou States Barini aprey Sourcion	BIGHNIGH OF FOLKIONING		-	
Case number				
(if known)				t if this is an ded filing
			anien	ded illing
Official Form 106D				
	rs Who Have Claims Secured	l by Propert	v	12/15
	ole. If two married people are filing together, both are equents, out, number the entries, and attach it to this form. On the			
Do any creditors have claims secure	d by your property?			
	nit this form to the court with your other schedules. Y	ou have nothing else	to report on this form	
☐ No. Greek this box and subi	•	ou have nothing else	to report on this form.	
Part 1: List All Secured Claims	on bolow.			
		Column A	Column B	Column C
	as more than one secured claim, list the creditor separately r has a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
	betical order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 ORIENTAL BANK PR	Describe the preparty that accuracy the claims	value of collateral. \$48,362.00	claim \$48,368.00	If any \$0.00
Creditor's Name	Describe the property that secures the claim: 2022 NISSAN MURANO 26373 miles	ψ+0,302.00	Ψ+0,500.00	Ψ0.00
Ground of Name				
PO BOX 195115	As of the date you file, the claim is: Check all that apply.			
San Juan, PR 00919-5115	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another				
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 08/30/202	2 Last 4 digits of account number 1530			
PERFORMANCE				
FINANCE	Describe the property that secures the claim:	\$16,942.00	\$29,522.00	\$0.00
Creditor's Name	2022 INDIAN CHALLENGER 5000			
	miles			
1515 W 22ND	As of the date you file, the claim is: Check all that			
STREET,SUITE 100W	apply.			
Oak Brook, IL 60523 Number, Street, City, State & Zip Code	_			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.	d		
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	urea		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another. Check if this claim relates to a	er			
community debt	_ ,			
Date debt was incurred 05/2022	Last 4 digits of account number 2067			
Add the dollar value of your entries	n Column A on this page. Write that number here:	\$65,30	04.00	
	dd the dollar value totals from all pages.	\$65,30	04 00	
Write that number here:		\$00,3t	U-T.UU	

Debtor 1	RAFAEL MONSE	RRATE CARO ADORNO)	Case number (if known)	
Debtor 2	First Name MARIA ESTHER	Middle Name CANCEL RODRIGUEZ	Last Name		
	First Name	Middle Name	Last Name		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this	s information to identify your case:				
Debtor 1	RAFAEL MONSERRAT	E CARO ADORNO			
Deptor i		Middle Name Last Name			
Debtor 2	MARIA ESTHER CANC	EL RODRIGUEZ			
(Spouse if, fill		Middle Name Last Name			
United Sta	ates Bankruptcy Court for the: DIST	RICT OF PUERTO RICO			
Case num	shor				
(if known)					if this is an ed filing
<u>Official</u>	Form 106E/F				
Schedi	ule E/F: Creditors Who l	lave Unsecured Claims			12/15
Schedule G Schedule D left. Attach	: Executory Contracts and Unexpired Lea: Creditors Who Have Claims Secured by	uld result in a claim. Also list executory contra- ases (Official Form 106G). Do not include any cre Property. If more space is needed, copy the Par u have no information to report in a Part, do not the	editors with partially se t you need, fill it out, r	ecured claims that a number the entries in	re listed in the boxes on the
	creditors have priority unsecured claim				
-	Go to Part 2.	s against you?			
possibl Part 1.	e, list the claims in alphabetical order according more than one creditor holds a particular	priority and nonpriority amounts, list that claim here a ding to the creditor's name. If you have more than two claim, list the other creditors in Part 3. Instructions for this form in the instruction booklet.)			
2.1 IF	RS	Last 4 digits of account number	\$2,250.00	\$2,250.00	\$0.00
	iority Creditor's Name				70.00
	O BOX 8202	When was the debt incurred?			
	hiladelphia, PA 19101-8202 umber Street City State Zip Code	As of the date you file, the claim is: Check	all that apply		
	incurred the debt? Check one.	Contingent	ан шасарыу		
_	ebtor 1 only	☐ Unliquidated			
	ebtor 2 only	☐ Disputed			
	ebtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	least one of the debtors and another	Domestic support obligations			
	neck if this claim is for a community	☐ Taxes and certain other debts you owe the ☐ Claims for death or personal injury while yo			
Is the ⊠ No □ Ye		☐ Other. Specify			
Part 2:	List All of Your NONPRIORITY Uns	ecured Claims			
	r creditors have nonpriority unsecured cl				
	• •	<u> </u>			
☐ No. ☐ Yes	• , ,	mit this form to the court with your other schedules.			
unsecu	red claim, list the creditor separately for each	the alphabetical order of the creditor who holds th claim. For each claim listed, identify what type of ther creditors in Part 3.If you have more than three n	claim it is. Do not list cla	ims already included	in Part 1. If more

Total claim

Debtor 1 RAFAEL MONSERRATE CARO ADORNO
Debtor 2 MARIA ESTHER CANCEL RODRIGUEZ Case number (if known)

4.1	AMERICAN ENTERPRISES	Last 4 digits of account number 1019	\$3,093.00
	Nonpriority Creditor's Name		
	PO BOX 610	When was the debt incurred? 06/2022	
	Germantown, WI 53022	-	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	⊠ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	☑ Other. Specify INSTALLEMENT ACCOUNT	
	AMERICAN ENTERPRISES	Last 4 digits of account number 1019	\$3,093.00
4.2	Nonpriority Creditor's Name	Last 4 digits of account number 1019	\$3,U33.UU
	PO BOX 610	When was the debt incurred? 06/2022	
	Germantown, WI 53022	when was the dept incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that appry	
		□ Contingent	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	_		
	Yes	☑ Other. Specify INSTALLEMENT ACCOUNT	
4.3	BOMBARDIER/CBNA	Last 4 digits of account number 2077	\$5,687.00
4.5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0,007.00
	5800 South Corporate Place	When was the debt incurred? 12/2022	
	Sioux Falls, SD 57108	A settle date of the decided to the little to the	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☑ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	⊠ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify REVOLVING ACCOUNT	

RAFAEL MONSERRATE CARO ADORNO Debtor 1 Debtor 2 MARIA ESTHER CANCEL RODRIGUEZ Case number (if known) **ISLAND FINACES** Last 4 digits of account number 0179 \$5,706.00 Nonpriority Creditor's Name PO BOX 71504 08/2021 When was the debt incurred? San Juan, PR 00939 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☑ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify INSTALLEMENT ACCOUNT ☐ Yes 4.5 **LUMA ENERGY** 2111 \$1,571.46 Last 4 digits of account number Nonpriority Creditor's Name **REVENUE PROTECTION VARIOUS** When was the debt incurred? PO BOX 364267 San Juan, PR 00936 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated ☑ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☑ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify UTILITY ☐ Yes \$1,381.00 **ORIENTAL BANK PR** 5030 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 195115 3/2020 When was the debt incurred? San Juan, PR 00919-5115 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated

Official Form 106 E/F

☐ Disputed

☐ Student loans

report as priority claims

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

□ Debts to pension or profit-sharing plans, and other similar debts
 ☑ Other. Specify INSTALLEMENT ACCOUNT

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

debt

☑ No

☐ Yes

☐ At least one of the debtors and another☐ Check if this claim is for a community

RAFAEL MONSERRATE CARO ADORNO Debtor 1 Debtor 2 MARIA ESTHER CANCEL RODRIGUEZ Case number (if known) 4.7 ORIENTAL BANK PR Last 4 digits of account number 3720 \$36,456.00 Nonpriority Creditor's Name PO BOX 195115 05/2021 When was the debt incurred? San Juan, PR 00919-5115 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☑ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify INSTALLEMENT ACCOUNT ☐ Yes 4.8 PERFORMANCE FINANCE 2067 \$18,508.00 Last 4 digits of account number Nonpriority Creditor's Name 1515 W 22ND STREET, SUITE 100W 05/2022 When was the debt incurred? Oak Brook, IL 60523 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify INSTALLEMENT ACCOUNT

PR TELEPHONE 2499 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 70367 06/2022 When was the debt incurred? San Juan, PR 00936-8367 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated □ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☑ No ☐ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify CELLULAR SERVICES ☐ Yes

☐ Unliquidated

☐ Student loans

report as priority claims

☐ Disputed

☐ Debtor 2 only

☑ No

☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

☐ Check if this claim is for a community

\$309.00

ı							
THE	E HOME priority Cred		Last 4 digits of account number	1679			\$1,219.00
		I CORPORATE PLACE	When was the debt incurred?	06/20	021		
Sio	ux Falls,	SD 57108					
Num	nber Street C	City State Zip Code	As of the date you file, the claim i	i s: Check	k all that a	oply	
Who	o incurred tl	he debt? Check one.					
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
		Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
		claim is for a community	☐ Student loans				
debt			☐ Obligations arising out of a sepa	ration ag	reement o	r divorce that you did not	
		eject to offset?	report as priority claims				
⊠N	No		☐ Debts to pension or profit-sharing	• •		similar debts	
☐ Y	es es		☑ Other. Specify REVOLVIN	G ACC	OUNT		
1							
		AND ASSOCIATES	Last 4 digits of account number	1298			\$1,056.00
	priority Cred			00/00	204		
_	BOX 502		When was the debt incurred?	09/20	J21		
		N 37950-0250	A confidence of the decoration	. 0			
		City State Zip Code	As of the date you file, the claim i	s: Check	k all that a	oply	
_		he debt? Check one.					
_	Debtor 1 only		Contingent				
_	Debtor 2 only		Unliquidated				
		Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
		claim is for a community	☐ Student loans				
debt		:++#+O	Obligations arising out of a sepa	ration ag	reement o	r divorce that you did not	
		eject to offset?	report as priority claims				
⊠N	NO		☐ Debts to pension or profit-sharing				
☐ Y	es/es		☑ Other. Specify DEBT COL	LECTIO	ON AGE	NCY	
: 3: Li	ist Others	to Be Notified About a Debt	That You Already Listed				
trying to ve more tified for	collect from than one co r any debts	n you for a debt you owe to some	· -	Parts 1	or 2, then	list the collection agency	here. Similarly, if you
	amounts of secured clai		ns. This information is for statistical	reporting	g purpose	, ,	I the amounts for each
	0-	Demostic compant ability		65		Total Claim	
l claims	6a.	Domestic support obligations		6a.	\$	0.00	
Part 1	6b.	Taxes and certain other debts y	ou owe the government	6b.	\$	2,250.00	
	6c.	Claims for death or personal inj	ury while you were intoxicated	6c.	\$ ——	0.00	
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a through	nh 6d	6e.	•	2 250 00	
	oe.	. Jan i Hority. Add illes da tillout	gii ou.	os.	\$	2,250.00	
		•		0.5		Total Claim	
	6f.	Student loans		6f.	\$	0.00	

Total claims

from Part 2

6g.

6h.

6i.

6j.

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

6h.

6i.

0.00

0.00

78,079.46

78,079.46

Debtor 1	RAFAEL MONSERRATE CARO ADORNO
Debtor 2	MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)

Fil	l in this info	rmation to identify your	case:			
De	ebtor 1	RAFAFI MONSE	RRATE CARO ADORN	0		
	DIOI I	First Name	Middle Name	Last Name		
De	ebtor 2	MARIA ESTHER	CANCEL RODRIGUEZ			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States B	ankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
_	ase number (nown)					Check if this is an amended filing
		orm 106G e G: Executor	y Contracts an	d Unexpired Leas	es	12/15
info	ormation. If n	nore space is needed, o		are filing together, both are eq fill it out, number the entries, a		
1.	☐ No. Che	ck this box and file this fo		other schedules. You have not leases are listed on <i>Schedule A</i>		
2.		ent, vehicle lease, cell p		ve the contract or lease. Then s for this form in the instruction be		
	Person or	company with whom y Name, Number, Street, City	ou have the contract or le	ase State what the contr	act or lease is fo	or
2	РО В	O POPULAR DE PR OX 362708 uan, PR 00936-2708		2019 CHEVROL	ET TRAX 1800	OO miles

Fill in this	information to identify y	our case:		
Debtor 1	RAFAEL MON	SERRATE CARO AD	ORNO	
	First Name	Middle Name	Last Name	
Debtor 2		R CANCEL RODRIG		
(Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for th	e: DISTRICT OF PU	ERTO RICO	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
	lule H: Your Co	ndehtors		12/15
OCITE	idic II. Todi Ot	Jacotoi 3		12/13
people are fill it out, a your name	e filing together, both are and number the entries in a and case number (if kno	equally responsible for the boxes on the left. A wn). Answer every que	supplying correct information. Attach the Additional Page to thi stion.	mplete and accurate as possible. If two married If more space is needed, copy the Additional Page, s page. On the top of any Additional Pages, write
1. Do	you have any codebtors?	(If you are filing a joint of	case, do not list either spouse as a	codebtor.
⊠ No □ Ye				
			nity property state or territory? (oco, Puerto Rico, Texas, Washingto	Community property states and territories include n, and Wisconsin.)
_	. Go to line 3. s. Did your spouse, former	spouse, or legal equivale	ent live with you at the time?	
in line Form	e 2 again as a codebtor or	nly if that person is a g	uarantor or cosigner. Make sure	our spouse is filing with you. List the person shown you have listed the creditor on Schedule D (Official Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State a	nd ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			Schedule E/F, line
				Schedule G, line
-	Number Street			
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			Schedule E/F, line
				Schedule G, line
-	Number Street			
	City	State	ZIP Code	

Fill	in this information to i	dentify your ca	ase:									
Del	otor 1	RAFAEL MO	NSERRATE CARO A	DORNO)		_					
	otor 2	MARIA ESTI	HER CANCEL RODRI	GUEZ			_					
Uni	ted States Bankruptc	y Court for the	DISTRICT OF PUERT	O RICO)		_					
	se number nown)								nended plemen	ıt showin	ng postpetitior	
0	fficial Form 1	1061							DD/ YY		ollowing date	•
	chedule I: Y		ome					IVIIVI / I	וז /טט	11		12/15
sup spo atta	plying correct inforn use. If you are separ ch a separate sheet	nation. If you ated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointl th you,	y, and your sp do not include	oouse i e inforr	is liv natio	ring with you on about you	ı, inclu ır spot	de infor ıse. If m	mation abou ore space is	t your needed,
1.	Fill in your employ information.	ment		Debto	or 1			Dek	btor 2	or non-f	iling spouse	
	If you have more the attach a separate painformation about a employers.	e page with	Employment status		nployed t employed				Employ Not em			
	Include part-time, seasonal, or		Occupation	UBE	R DRIVER			COMEDORES ESCOL			SCOLARE	s
	self-employed work		Employer's name UBER			DEBT DE EDUCACION						
	Occupation may income or homemaker, if it		Employer's address	1515 3RD STREET San Francisco, CA 94158			AVE. TENIENTE CESAR GONZ ESQ CALAF San Juan, PR 00919				ONZ	
			How long employed th	nere?	7 years				12	years		
Par	ft 2: Give Detai	ils About Mor	thly Income									
	mate monthly incom		te you file this form. If yo	ou have	nothing to repo	rt for ar	ny lin	e, write \$0 in t	the spa	ce. Inclu	de your non-f	iling spouse
	ou or your non-filing sp e space, attach a sep		ore than one employer, co	mbine tl	ne information	for all e	emplo	oyers for that	person	on the I	ines below. If	you need
								For Debtor	1		btor 2 or ing spouse	
2.		•	ry, and commissions (be calculate what the monthly			2.	\$	0	0.00	\$	1,673.82	-
3.	Estimate and list n	nonthly overt	ime pay.			3.	+\$	0	0.00	+\$	0.00	1
4.	Calculate gross In	come. Add lin	ne 2 + line 3.			4.	\$	0.00	0_	\$	1,673.82	

Case number (if known)

				Fo	r Debtor 1	For Debt		
	Сору	line 4 here	4.	\$_	0.00	\$	1,673.82	
5.	List a	ıll payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	0.00	\$ \$	201.29 111.68	
	5c.	Voluntary contributions for retirement plans	5c.	\$ -	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	3.14	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	18.76	
	5h.	Other deductions. Specify: AMER FAM LIFE ASS CO	_5h.+	\$	0.00 +	· \$	115.40	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	450.27	
7.	Calcu	late total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	1,223.55	
8.	List a 8a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	1,952.81	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	
	8e.	Social Security	8e.	\$_	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	- 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00 +	· \$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,952.81	\$	0.00]
10.		alate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,952.81 + \$_	1,223.5	5 = \$	3,176.36
11.	Includ other	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a fy:	depen availab	le to	pay expenses liste	ed in <i>Sched</i>	ule J. I. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines			•			3,176.36
	_		_				Combine monthly	
13.	Do yo □	ou expect an increase or decrease within the year after you file this form? No. Yes. Explain:	?					

						•			
Fill	in this informa	ation to identify yo	our case:						
Deb	otor 1	RAFAEL MO)NSERRA	TE CARO ADORN	10	Cł	neck	if this is:	
Dah	star O	MADIA 5071		IOEL BODDIOLIEZ				n amended filing	da a a a a san a stata a a a ta a a ta a a 40
l	otor 2 ouse, if filing)	MARIA ESTI	HER CAN	ICEL RODRIGUEZ				supplement show expenses as of the	ving postpetition chapter 10 following date:
(0)	ouse, ii iiiiig <i>j</i>						_	жропосо до ст инс	
Unit	ted States Bank	ruptcy Court for the	: DISTRI	CT OF PUERTO RIC	0		Λ	/M / DD / YYYY	
Cas	e number								
	nown)								
\bigcirc	fficial Ea	orm 106J							
		J: Your							12/1
					le are filing together, b				or supplying correct or name and case numbe
		wer every questi				,			
Par	t 1: Desc	ribe Your House	ehold						
1.	Is this a joi		, iioiu						
	☐ No. Go t								
			in a separ	ate household?					
	⊠ N □ N		st file Offici	ial Form 106.I-2 Expe	enses for Separate House	ehold of D	ebto	or 2	
•				1000 E, EXPO	noo non coparato modo.	0//0/4 0/ 5	ODIC		
2.	•	re dependents?	_						
	Do not list L Debtor 2.	Debtor 1 and	∐ Yes.	Fill out this information each dependent				Dependent's age	Does dependent live with you?
	Do not state	the		odon dopondona	Bobtor i oi Bobto	/1 =		ugo	□ No
	dependents								Yes
									□ No
							_		☐ Yes ☐ No
									Yes
									□ No □ Yes
3.	Do your ex	penses include	\boxtimes	No					□ 165
		of people other t		Yes					
	yourself an	id your depende	nts?						
Par		nate Your Ongoi							
					ess you are using this f				
	olicable date.		Dankrupic	y is ilieu. Il tilis is a	supplemental <i>Schedul</i> e	e J, check	LITE	e box at the top o	f the form and fill in the
				government assistar ed it on <i>Schedule I:</i>					
(Of	ficial Form 1	061.)					_	Your expe	enses
		_							
4.		or home owners nd any rent for th			ce. Include first mortgag		\$		400.00
	paymonto a	ind dirty form for the	o ground o			••	Ψ		100100
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
		erty, homeowner'	s, or renter	's insurance		4b.			
		·		ıpkeep expenses		4c.			
		eowner's associa				4d.	\$		0.00
5.	Additional	mortgage paym	ents for yo	our residence, such a	as home equity loans	5.	\$		0.00
6.	Utilities:								
		ricity, heat, natura	-			6a.			145.00
		r, sewer, garbage				6b.			45.00
	•	hone, cell phone r. Specify:	, internet, s	satellite, and cable ser	vices	6c.			138.00 0.00
	Ju. Olilei	. opcony.				6d.	Ф		0.00

ODIO! I	RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ	Case number (if know	n)
<u> </u>		Caco Hamber (II kilowi	
	and housekeeping supplies	7. \$	777.00
. Childc	are and children's education costs	8. \$	0.00
Clothir	ng, laundry, and dry cleaning		40.00
0. Person	nal care products and services	40 0	78.00
 Medica 	al and dental expenses	11. \$	40.00
	portation. Include gas, maintenance, bus or train fare. include car payments.	12. \$	260.00
	ainment, clubs, recreation, newspapers, magazines, and books	13. \$	54.00
	able contributions and religious donations	14. \$	0.00
5. Insura i	•	· · · · · · · · · · · · · · · · · · ·	
	include insurance deducted from your pay or included in lines 4 or 20		
15a. L	Life insurance	15a. \$	0.00
15b. F	Health insurance		0.00
15c. ∖	/ehicle insurance		0.00
15d. C	Other insurance. Specify:		0.00
	Do not include taxes deducted from your pay or included in lines 4 or		
Specify		4C	0.00
	ment or lease payments:		
17a. (Car payments for Vehicle 1	17a. \$	880.00
17b. (Car payments for Vehicle 2	17b. \$	0.00
17c. (Other. Specify: MUEBLERIA BERRIOS	47 - A	48.00
17d. (Other. Specify:	 17d. \$	0.00
	ayments of alimony, maintenance, and support that you did not i		
	ted from your pay on line 5, Schedule I, Your Income (Official For	m 106l). 18. \$	0.00
Other p	payments you make to support others who do not live with you.	\$	0.00
Specify	<i>I</i> :	19.	<u> </u>
). Other i	real property expenses not included in lines 4 or 5 of this form or	on Schedule I: Your Income	
20a. N	Mortgages on other property	20a. \$	81.36
20b. F	Real estate taxes	20b. \$	0.00
20c. F	Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. N	Maintenance, repair, and upkeep expenses	001 6	0.00
20e. H	Homeowner's association or condominium dues	20e. \$	0.00
. Other:	Specify:	21. +\$	0.00
Calcul	ate your monthly expenses		
	dd lines 4 through 21.	\$	2,986.36
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form	· <u> </u>	2,300.30
22c. Ac	dd line 22a and 22b. The result is your monthly expenses.	\$	2,986.36
3. Calcula	ate your monthly net income.	<u> </u>	
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,176.36
23b. C	Copy your monthly expenses from line 22c above.	23b\$	2,986.36
		·	· · · · · · · · · · · · · · · · · · ·
23c. S	Subtract your monthly expenses from your monthly income.		
Ţ	Γhe result is your <i>monthly net income</i> .	23c. \$	190.00
For exar modifica No.	Description are presented as a series of decrease in your expenses within the year apple, do you expect to finish paying for your car loan within the year or do you extend to the terms of your mortgage?		increase or decrease because of a
☐ Yes	Explain here:		

Fill in this infor	matica to identify your or			
Fill III tills IIIIOI	mation to identify your ca			
Debtor 1	RAFAEL MONSERF	RATE CARO ADORNO Middle Name	Last Name	
Debtor 2		ANCEL RODRIGUEZ	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the: _	DISTRICT OF PUERTO I	RICO	
Case number				
(if known)				Check if this is an
				amended filing
Official Forn	n 106Dec			
		ı Individual	Debtor's Schedul	es 12/1
<u> </u>		- III GITTIGGG	202101 0 00110441	1271
If two married pe	eople are filing together, l	both are equally respon	sible for supplying correct informa	tion.
You must file thi	s form whenever you file	hankruntcy schedules	or amended schedules. Making a f	alse statement, concealing property, or
obtaining money	or property by fraud in o	connection with a bankr		\$250,000, or imprisonment for up to 20
years, or both. 1	8 U.S.C. §§ 152, 1341, 15	19, and 3571.		
Sig	n Below			
O.g.				
Did you pa	y or agree to pay someor	ne who is NOT an attorn	ney to help you fill out bankruptcy f	orms?
, .	, , ,			
⊠ No				
☐ Yes.	Name of person			tach Bankruptcy Petition Preparer's Notice,
			De	eclaration, and Signature (Official Form 119)
	ity of perjury, I declare the true and correct.	at I have read the sumn	nary and schedules filed with this o	declaration and
•				
	FAEL M. CARO ADORN		/s/ MARIA E. CANCEI	
	EL MONSERRATE CAF re of Debtor 1	KU ADUKNU	MARIA ESTHER CAN Signature of Debtor 2	CEL KUDKIGUEZ
o.gata			5.ga.a.o 5. 5 55.67 2	
Date _	July 31, 2023		Date July 31, 2023	

11	l in this inforn	nation to identify yo						
De	ebtor 1	RAFAEL MONS	SERRATE CARO ADORN Middle Name	10	Last Name			
De	ebtor 2		R CANCEL RODRIGUEZ		<u>Last Hams</u>			
	ouse if, filing)	First Name	Middle Name		Last Name			
Un	nited States Bar	nkruptcy Court for the	e: DISTRICT OF PUERTO	RICO				
Ca	se number							
(if k	known)						_	Check if this is an amended filing
St Be info	as complete a	of Financia	Affairs for Indivi	are filir	ng together, both are	e equally respon	sible for sup	
			Marital Status and Where Yo	ou Lived	Before			
1.	What is you	r current marital sta	atus?					
	☐ Married ☐ Not mar	ried						
2.	During the la	ast 3 years, have yo	ou lived anywhere other than	n where	you live now?			
	⊠ No □ Yes. Lis	t all of the places yo	u lived in the last 3 years. Do	not inclu	de where you live nov	W.		
	Debtor 1:		Dates Debtor lived there	1	Debtor 2 Prior Ad	ddress:		Dates Debtor 2 lived there
3. stat			ever live with a spouse or lo California, Idaho, Louisiana, N					
	⊠ No □ Yes. Ma	ike sure you fill out S	Schedule H: Your Codebtors (Official F	orm 106H).			
Pa	rt 2 Explai	n the Sources of Yo	our Income					
4.	Fill in the tota	al amount of income	employment or from operat you received from all jobs and ou have income that you recei	l all busi	nesses, including part	t-time activities.	revious cale	endar years?
	⊠ No □ Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(bet	oss income fore deductions and	Sources of in Check all that		Gross income (before deductions

De	btor 2 M	ARIA ESTI	HER CANCE	L RODF	RIGUEZ		Cas	se number (if known)			
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.										
	List each	source and t	the gross incor	me from e	each source sepa	arately. Do i	not include income	that you listed in lir	ne 4.		
	⊠ No □ Yes.	Fill in the de	etails.								
				Debtor 1				Debtor 2			
				Sources Describe	of income below.	each (befor	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deduction and exclusions)	ons
Pa	rt 3: Lis	t Certain Pa	yments You I	Made Bet	fore You Filed fo	or Bankrup	otcy				
No. No.								ou do			
	5.0400.	's Name and			Dates of pay		Total amount paid	Amount you still owe	, , , , , , , , , , , , , , , , , , ,	eayment for	
7.	 Within 1 year before you filed for bankrup Insiders include your relatives; any general corporations of which you are an officer, directly including one for a business you operate as support and alimony. No Yes. List all payments to an insider. 				artners; relatives ctor, person in co	of any generation	eral partners; partn ner of 20% or more	erships of which yo e of their voting sec	u are a gene urities; and a	ral partner; ny managing agei	
	Insider's	Name and	Address		Dates of pay	ment	Total amount	Amount you	Reason fo	r this payment	
3.	within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No □ Yes. List all payments to an insider										
		Name and			Dates of pay	ment	Total amount	Amount you		r this payment	
							paid	still owe	include cre	ditor's name	

Debtor 1 RAFAEL MONSERRATE CARO ADORNO

	btor 1 MARIA ESTHER CANCEL ROD		Case number	(if known)	
Pa	rt 4: Identify Legal Actions, Repossessi	ons, and Foreclosures			
9.	Within 1 year before you filed for bankruptist all such matters, including personal injure modifications, and contract disputes.	otcy, were you a party in ar			
	NoYes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
10.	Within 1 year before you filed for bankrul Check all that apply and fill in the details bel		erty repossessed, foreclosed	l, garnished, attache	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
11	Within 90 days before you filed for bankr	Explain what happened		atitution, out off any	amounto from your
11.	accounts or refuse to make a payment be No Yes. Fill in the details.		idding a bank of illiancial ins	stitution, set on any a	amounts nom your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or □ No □ Yes		erty in the possession of an	assignee for the ben	efit of creditors, a
Pa	t 5: List Certain Gifts and Contributions	8			
13.	Within 2 years before you filed for bankru ☑ No ☐ Yes. Fill in the details for each gift.	uptcy, did you give any gift	s with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person	0 Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ☑ No		s or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co Gifts or contributions to charities that more than \$600 Charity's Name		ı contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code)			
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup disaster, or gambling?	otcy or since you filed for b	oankruptcy, did you lose any	thing because of the	ft, fire, other
	NoYes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Describe any insurance co Include the amount that insu insurance claims on line 33 of	rance has paid. List pending	Date of your loss	Value of property lost

Dek	tor 2 MARIA ESTHER CANCEL RODRIGU	JEZ		ase number (i	if known)				
Par	7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepare Include any attorneys, bankruptcy petition prepare	ring a bankruptcy pet	ition?			rty to anyone you			
	NoYes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount o paymer			
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.								
	NoYes. Fill in the details.								
	Person Who Was Paid Address	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount o paymen			
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details.	iness or financial affa e as security (such as t	nirs? he granting of a se						
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr			ny property or received or debts change	Date transfer was made			
19.	Nithin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a peneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and v	Description and value of the property transferred						
Par	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units					
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associat ☑ No ☐ Yes. Fill in the details.	other financial accour	nts; certificates o	of deposit; sh					
		ast 4 digits of ccount number	Type of accoun instrument	clos	e account was sed, sold, ved, or nsferred	Last balanc before closing o transfe			
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ar before you filed for	bankruptcy, any	safe deposit	box or other deposi	tory for securities,			
	NoYes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the c	Do you still have it?				

Del	otor 2 MARIA ESTHER CANCEL RODRIGU	EZ	Case number (if known)							
22	Have you stored property in a storage unit or pl	ace other than your home within	1 year before you filed for bankruptcy?	,						
	 No Yes. Fill in the details. 	and care than Jo an Home mann	. your advoice you mod to. Summapley.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?						
Pai	t 9: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.									
	☑ No☐ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Pai	t 10: Give Details About Environmental Information	ation								
For	the purpose of Part 10, the following definitions	apply:								
\boxtimes	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, groun								
\boxtimes	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate, o	or utilize it or used						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s	mental law defines as a hazardou	s waste, hazardous substance, toxic s	ubstance,						
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.							
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
24.	☑ No☐ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any	release of hazardous material?								
	☑ No☐ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	vironmental law? Include settlements a	and orders.						
	☑ No☐ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Pai	t 11: Give Details About Your Business or Con	nections to Any Business								
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to any	business?						
	\square A sole proprietor or self-employed in a t	rade, profession, or other activity	, either full-time or part-time							
	☐ A member of a limited liability company	(LLC) or limited liability partnersl	hip (LLP)							
	☐ A partner in a partnership	ive of a corneration								
	☐ An officer, director, or managing execut	•	•							
	ALLOVIEL OF BLIEBSLO /A OF THE VOUITO OF	ENGLY SECULICES OF A COLUCIATION								

Debtor 1 RAFAEL MONSERRATE CARO ADORNO

Debtor 2 MARIA ESTHER CANCEL RODRIGUEZ			Ca	ase number (if known)
	 ✓ No. None of the above applies. Go to Part 12. ✓ Yes. Check all that apply above and fill in the details below for each business. 			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the n	ature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fina institutions, creditors, or other parties. ☑ No ☐ Yes. Fill in the details below. 				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part 12: Sign Below				
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
/s/ RAFAEL M. CARO ADORNO RAFAEL MONSERRATE CARO ADORNO Signature of Debtor 1		MARI	/s/ MARIA E. CANCEL RODRIGUEZ MARIA ESTHER CANCEL RODRIGUEZ Signature of Debtor 2	
Dat	July 31, 2023	Date	July 31, 2023	
Did you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)? ☐ No ☐ Yes				
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☑ No ☐ Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				

Fill in this information to identify your case:						
Debtor 1	AFAEL MONSERRATE CARO ADORNO					
Debtor 2 (Spouse, if filing)	MARIA ESTHER CANCEL RODRIGUEZ					
United States B	ankruptcy Court for the: District of Puerto Rico					
Case number (if known)						

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	11: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one ☐ Not married. Fill out Column A, lines 2-11. ☐ Married. Fill out both Columns A and B, lines 2-1	·						
Fo	ill in the average monthly income that you received from a or example, if you are filing on September 15, the 6-month pe dd the income for all 6 months and divide the total by 6. Fill in ental property, put the income from that property in one colum	riod would be the result.	oe March 1 through Do not include any	h August 3 income a	31. If the amount of your amount more than once.	monthly ir For exam	ncome varied duri	ng the 6 months,
					Column A Debtor 1	Colum. Debto		
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissions (be		\$0.00	\$	2,173.82	
3.	Alimony and maintenance payments. Do not inclu Column B is filled in.	de payme	ents from a spou		\$	\$	0.00	
4.	All amounts from any source which are regularly of you or your dependents, including child suppy from an unmarried partner, members of your househand roommates. Do not include payments from a spryou listed on line 3.	ort. Includ	e regular contrib dependents, par	outions rents, nents	\$0.00_	\$_	0.00	
5.	Net income from operating a business, profession, or farm	Debtor	1				· · · · · · · · · · · · · · · · · · ·	
	Gross receipts (before all deductions)	\$	2,844.81					
	Ordinary and necessary operating expenses -	<u> </u>	700.00					
	Net monthly income from a business, profession, or farm	§	2,144.81	Copy here -> \$	2,144.81	\$	0.00	
6.	Net income from rental and other real property	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real propert	y \$ _	0.00 Copy	here -> 3	\$ 0.00	\$	0.00	

Case number (if known)

		Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	
7.	Interest, dividends, and royalties	\$	0.00	\$	0.00	
8.	Unemployment compensation	\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:				_	
	For you\$ 0.00					
	For your spouse\$\$					
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.				_	
		\$	0.00	\$	0.00	
		\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	\$	0.00	\$	0.00	
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	2,144.81	+ \$	2,173.82		4,318.63
Part	2: Determine How to Measure Your Deductions from Income					
	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly such as payment of the spouse's tax liability or the spouse's support of someone	/ paid for the l	nouseholo ou or you	d expenses of r dependents.		
	Below, specify the basis for excluding this income and the amount of income devo on a separate page.	oted to each p	urpose. If	f necessary, lis	t additio	nal adjustments
	If this adjustment does not apply, enter 0 below.					
	\$		_			
	\$		_			
	+\$		_			
	Total\$	0.00	Сор	y here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.				\$	4,318.63
15.	Calculate your current monthly income for the year. Follow these steps:					
	15a. Copy line 14 here=>				\$	4,318.63

Debto Debto	or1 👢		AEL MONSERRATE CARO ADORNO A ESTHER CANCEL RODRIGUEZ		Case number (<i>if known</i>)		
		Mul	tiply line 15a by 12 (the number of months in	a year).		x 12	
	15b.	The	result is your current monthly income for the	year for this part of th	e form	\$51,823.50	<u>6</u>
16.	Calcu	late t	he median family income that applies to y	ou. Follow these steps	y:		
	16a. F	ill in t	the state in which you live.	PR			
	16b. F	ill in t	he number of people in your household.	2			
	٦	o find	he median family income for your state and s d a list of applicable median income amounts stions for this form. This list may also be avai	s, go online using the lir	nk specified in the separate	\$\$	<u>0</u>
17.			e lines compare?	. ,			
	17a.		Line 15b is less than or equal to line 16c. On U.S.C. § 1325(b)(3). Go to Part 3. Do NOT				der 1
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your Dispos			
Part	3:	Calc	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Сору	your	total average monthly income from line 1	1		\$\$.63
19.	that c	alcula	marital adjustment if it applies. If you are ting the commitment period under 11 U.S.C. by the amount from line 13.	married, your spouse i § 1325(b)(4) allows yo	s not filing with you, and you contend u to deduct part of your spouse's		
	19a. l	f the r	narital adjustment does not apply, fill in 0 on	line 19a.		-\$0	0.00
	19b. \$	Subtra	act line 19a from line 18.			\$\$	<u>3</u>
20.	Calcu	late y	our current monthly income for the year.	Follow these steps:			
	20a. 0	Сору	ine 19b			\$ <u>4,318.6</u>	3_
	ľ	∕lultip	y by 12 (the number of months in a year).			x 12	
	20b. T	he re	sult is your current monthly income for the yo	ear for this part of the f	orm	\$51,823.50	<u>6</u>
	20c. (Copy	the median family income for your state and	size of household from	line 16c	\$ 29,175.00	<u> </u>
	21. i	low o	lo the lines compare?			L	
	[ine 20b is less than line 20c. Unless otherwiseriod is 3 years. Go to Part 4.	se ordered by the court	, on the top of page 1 of this form, ch	eck box 3, The commitme	nent
	[⊠ L	ine 20b is more than or equal to line 20c. Un	less otherwise ordered	by the court, on the top of page 1 of	this form, check box 4. 7	The

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ RAFAEL M. CARO ADORNO

RAFAEL MONSERRATE CARO ADORNO

commitment period is 5 years. Go to Part 4.

Signature of Debtor 1

Date **July 31, 2023**

MM / DD / YYYY

X /s/ MARIA E. CANCEL RODRIGUEZ

MARIA ESTHER CANCEL RODRIGUEZ

Signature of Debtor 2

Date July 31, 2023

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

RAFAEL MONSERRATE CARO ADORNO	
MARIA ESTHER CANCEL RODRIGUEZ	

ARIA ESTHER CANCEL RODRIGUEZ	Case number (if known)

Fill in this information to identify your case:	
Debtor 1 RAFAEL MONSERRATE CARO ADORNO	
Debtor 2 MARIA ESTHER CANCEL RODRIGUEZ (Spouse, if filing)	
United States Bankruptcy Court for the: District of Puerto Rico	
Case number(if known)	☐ Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable Ir	1 COME 04/22
To fill out this form, you will need your completed copy of <i>Chapter 13 Stateme Commitment Period</i> (Official Form 122C-1).	nt of Your Current Monthly Income and Calculation of
Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form, include the line number t pages, write your name and case number (if known).	
Part 1: Calculate Your Deductions from Your Income	
The Internal Revenue Service (IRS) issues National and Local Standards for questions in lines 6-15. To find the IRS standards, go online using the link information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the standards. Do not include any operating expenses if they are higher than the standards. Do not include any operating expenses if your expenses differ from month to month, enter the average expense. Note: Line numbers 1-4 are not used in this form. These numbers apply to inform 5. The number of people used in determining your deductions from income	nse. In later parts of the form, you will use some of your actual tenses that you subtracted from income in lines 5 and 6 of Form income in line 13 of Form 122C–1.
Fill in the number of people who could be claimed as exemptions on your fe the number of any additional dependents whom you support. This number r number of people in your household.	deral income tax return, plus
National Standards You must use the IRS National Standards to answ	er the questions in lines 6-7.
6. Food, clothing, and other items: Using the number of people you entered fill in the dollar amount for food, clothing, and other items.	n line 5 and the IRS National Standards, \$
7. Out-of-pocket health care allowance: Using the number of people you en the dollar amount for out-of-pocket health care. The number of people is sp people who are 65 or olderbecause older people have a higher IRS allowan higher than this IRS amount, you may deduct the additional amount on line	it into two categoriespeople who are under 65 and nce for health car costs. If your actual expenses are
People who are under 65 years of age	
7a. Out-of-pocket health care allowance per person \$ 79.00	

2 7b. Number of people who are under 65

Copy here=> \$ _____158.00 7c. **Subtotal.** Multiply line 7a by line 7b. 158.00

People who are 65 years of age or older

Official Form 122C-2

154.00 7d. Out-of-pocket health care allowance per person

Chapter 13 Calculation of Your Disposable Income

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)

7e.	Number of people who are 65 or older	x	0_					
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here	=> \$	0.00	
7g.	Total. Add line 7c and line 7f			\$	158.00		Copy total here=>	\$158.00_
Local S	tandards You must use the IRS Local Standards	s to answe	er the question	ons in Iir	ies 8-15.			
	on information from the IRS, the U.S. Trustee Pro	gram has	s divided the	e IRS Lo	cal Standar	d for h	ousing for bank	ruptcy
 ⊠ Hous	es into two parts: sing and utilities - Insurance and operating expe sing and utilities - Mortgage or rent expenses	enses						
To answ	ver the questions in lines 8-9, use the U.S. Trusto					nline ເ	sing the link spe	ecified in the separate
8. Ho	ions for this form. This chart may also be availa using and utilities - Insurance and operating exp dollar amount listed for your county for insurance a	enses: U	sing the num	ber of p		tered i	n line 5, fill in \$_	640.00
9. Ho	using and utilities - Mortgage or rent expenses:							
9a.	Using the number of people you entered in line 5 listed for your county for mortgage or rent expense.		dollar amou	nt		\$	732.00	
9b.	Total average monthly payment for all mortgages. To calculate the total average monthly payment, contractually due to each secured creditor in the 6 bankruptcy. Next divide by 60.	add all an	nounts that a	ire	our home.			
	Name of the creditor		Average moi payment	nthly				
	NONE-	\$;					
	9b. Total average monthly paym	ent \$	i	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.
9c.	Net mortgage or rent expense.							
	Subtract line 9b (total average monthly payment) rent expense). If this number is less than \$0, enter		e (mortgage)	or	\$	7;	Copy here=>	\$\$
	ou claim that the U.S. Trustee Program's division can be calculation of your monthly expenses,					g is inc	correct and	\$
E	xplain why:							

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)

11. Local transportation expenses: Check the number of vehi	icles for which you claim	an ownership or operating	g expense.	
	•			
☐ 1. Go to line 12.				
☑ 2 or more. Go to line 12.				
12. Vehicle operation expense: Using the IRS Local Standard	s and the number of vehi	cles for which you claim t	he	
operating expenses, fill in the <i>Operating Costs</i> that apply for				596.00
 Vehicle ownership or lease expense: Using the IRS Local may not claim the expense if you do not make any loan or le than two vehicles. 				
Vehicle 1 Describe Vehicle 1: 2022 NISSAN MURAN	∩ 26373 miles			
13a. Ownership or leasing costs using IRS Local Standard		. \$ 629.00		
13b. Average monthly payment for all debts secured by Vehicle 1				
Do not include costs for leased vehicles.				
To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60.		at		
Name of each creditor for Vehicle 1	Average monthly payment			
ORIENTAL BANK PR	\$ 860.00			
		7		
Total Average Monthly Payment	\$860.00	Copy here => -\$860	Repeat this amount on line 33b.	
13c. Net Vehicle 1 ownership or lease expense			Copy net	
Subtract line 13b from line 13a. if this number is less than \$6	0, enter \$0	\$	Vehicle 1 expense here => \$	0.00
Vehicle 2 Describe Vehicle 2: 2019 CHEVROLET TRA	AX 18000 miles			
13d. Ownership or leasing costs using IRS Local Standard		. \$ 0.00		
13e. Average monthly payment for all debts secured by Vehicle 2 leased vehicles.				
Name of each creditor for Vehicle 2	Average monthly payment			
NONE-				
NONE-	\$			
Total average monthly payment	\$0.00	Copy here => -\$ 0.0	Repeat this amount on line 33c.	
13f. Net Vehicle 2 ownership or lease expense		_	Copy net	
Subtract line 13e from line 13d. if this number is less than \$6	0, enter \$0		Vehicle 2 expense here	0.00
		\$0.00	\$	0.00
14. Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of			n the \$	0.00
15. Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in w claim more than the IRS Local Standard for <i>Public Transpor</i>	hat you believe is the app			0.00
·				

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

ase number (if known)		
ase number (# known)		

Oth		addition to the expense deduction following IRS categories.	tions listed above	, you are allowed your monthly expense	s for	
16.	self-employment taxes, social s	ecurity taxes, and Medicare to ver, if you expect to receive a total monthly amount that is wi	axes. You may ind tax refund, you mu	nd local taxes, such as income taxes, clude the monthly amount withheld from ust divide the expected refund by 12 and axes.	\$	627.99
17.	union dues, and uniform costs.			quires, such as retirement contributions,		0.00
12			•	11(k) contributions or payroll savings. insurance. If two married people are filin	\$	0.00
10.	together, include payments that	you make for your spouse's i	term life insurance			0.00
19.	agency, such as spousal or chil	d support payments.		by the order of a court or administrative		
		-		You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly a ⊠ as a condition for your job, o ⊠ for your physically or mental	or .		required: ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly ar	mount that you pay for childca	are, such as babys	sitting, daycare, nursery, and preschool.	<u>'</u>	_
	Do not include payments for any	, ,			\$	0.00
22.		elfare of you or your depende only the amount that is more	nts and that is not than the total ent		\$	0.00
23.	for you and your dependents, significant phone service, to the extent neclaration income, if it is not reimbursed by	uch as pagers, call waiting, ca cessary for your health and w y your employer. sic home telephone, internet a	aller identification, elfare or that of yo and cell phone se	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment tount you previously deducted.	+\$	0.00
24.	Add all of the expenses allow Add lines 6 through 23.	ed under the IRS expense a	allowances.		\$4	,142.99
Add	itional Expense Deductions	These are additional deduct Note: Do not include any ex				
25.				nses. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health insurance	\$	0.00			
	Disability insurance	\$ _	0.00			
	Health savings account	+ _	0.00	_		
	Total	\$ _	0.00	Copy total here=>	\$	0.00
	Do you actually spend this total ☐ No. How much do you a ☐ Yes					
26.	continue to pay for the reasonal your household or member of your	ble and necessary care and s	support of an elder	——— ne actual monthly expenses that you will rly, chronically ill, or disabled member of		
	include contributions to an acco			such expenses. These expenses may 529A(b)	\$	0.00
27.	Protection against family viole	ount of a qualified ABLE programent. The reasonably necess	ram. 26 U.S.C. § 5 sary monthly expe			0.00

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

_	Case number (i	f known)	

	8.	ergy costs are included in your insurance and c	perduring experience on mile				
	If you believe that you have home energy costs then fill in the excess amount of home energy α		ded in expenses on line 8,				
	You must give your case trustee documentation claimed is reasonable and necessary.	of your actual expenses, and you must show	that the additional amount	\$	0.00		
29.	Education expenses for dependent children \$189.58* per child) that you pay for your dependent public elementary or secondary school.						
	You must give your case trustee documentation is reasonable and necessary and not already ac		n why the amount claimed				
	* Subject to adjustment on 4/01/25, and every 3	years after that for cases begun on or after th	e date of adjustment.	\$	0.00		
30.	Additional food and clothing expense. The migher than the combined food and clothing allow 5% of the food and clothing allowances in the IF	vances in the IRS National Standards. That am					
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.						
	You must show that the additional amount claim	ned is reasonable and necessary.		\$	0.00		
31.	Continuing charitable contributions. The amoinstruments to a religious or charitable organiza		form of cash or financial				
	Do not include any amount more than 15% of you	our gross monthly income.		\$	0.00		
32.	22. Add all of the additional expense deductions. Add lines 25 through 31.						
Ded	uctions for Debt Payment						
	For debts that are secured by an interest in pro and other secured debt, fill in lines 33a throug		ages, vehicle loans,				
	To calculate the total average monthly payment, creditor in the 60 months after you file for bankru		each secured				
	Mortgages on your home			Average payment	monthly		
33a.	Copy line 9b here		=>	\$	0.00		
	Loans on your first two vehicles						
33b.	Copy line 13b here		=>	\$	860.00		
33c.	Copy line 13e here		=>	\$	0.00		
33d.	List other secured debts:						
Nam	ne of each creditor for other secured debt	entify property that secures the debt	Does payment include taxes or insurance?				
			☐ No				
	-NONE-		Yes	\$			
			□ No				
				\$			
			□ No □ Yes +	\$			
		Γ	<u> </u>	—			
33e	Total average monthly payment. Add lines 33a	\$	860.00 Copy total here=	> \$	860.00		

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)	
------------------------	--

34 Are any	dehts that you listed in li	ne 33 secured by your prima	rv residen	re a vehicle d	or			
		r support or the support of						
=	Go to line 35.		-1:4: 4 4l					
🛚 Yes.		u must pay to a creditor, in ad ssion of your property (called t			ed			
	divide by 60 and fill in the			· · · ,				
Name of the	creditor	Identify property that secur	res the debt	1	Total cure amount		onthly c	ure
ORIENTA	L BANK PR	2022 NISSAN MURAN	NO 26373	miles \$	2,580.00	÷ 60 = \$		43.00
				\$		÷ 60 = \$		
		_		\$		÷ 60 = +\$		
						Copy		
				Total	43.00	total here=>	\$	43.00
5. Do vou (owe any priority claims -	such as a priority tax, child	support. o	∟ r alimonv - tha	at			
		of your bankruptcy case? 1						
	Go to line 36.							
Yes.		all of these priority claims. Do		current or				
	0 0,	•		¢	2,250.00	÷ 60	\$	37.50
Total amount of all past-due priority claims					00	Ψ —	37.30	
o. Projecte	d monthly Chapter 13 pla	an payment		\$		=		
		s stated on the list issued by the						
		for districts in Alabama and N es Trustees (for all other distr			ζ			
To find a l	st of district multipliers that inc	cludes your district, go online using	g the link spec	cified in the				
separate i	nstructions for this form. This li	ist may also be available at the ba	inkruptcy cleri	k's office.		Copy total		
Average	monthly administrative exp	pense			\$	here=>		
· ·	,					_		
7 Add all	of the deductions for de	bt payment. Add lines 33e th	rough 36				\$	940.50
7. Add all	of the deductions for de	bt payment. Add illes 33e til	rough 30.				Ψ	340.50
otal Deduc	tions from Income							
8. Add all o	of the allowed deductions	S .						
	ne 24, All of the expenses a e allowances	allowed under IRS	\$	4,142.99				
expens		expense deductions	\$	0.00				
•	ne 32, All of the additional e							
Copy lir		for debt payment	+\$	940.50				
Copy lir		for debt payment	+\$	940.50				

RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ

Case number (if known)

Part 2	Determine Your Disposable Income Under 11 U.S.C. § 1325		(2)				
	Copy your total current monthly income from line 14 of Form 12. Statement of Your Current Monthly Income and Calculation of C	2C-	1, Chapter 13			. \$	4,318.63
40.	Fill in any reasonably necessary income you receive for support children. The monthly average of any child support payments, foster disability payments for a dependent child, reported in Part I of Form 1 received in accordance with applicable nonbankruptcy law to the extended sary to be expended for such child.	r car 1220	re payments, or C-1, that you	\$_	0	.00_	
41.	Fill in all qualified retirement deductions. The monthly total of all a employer withheld from wages as contributions for qualified retirement 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retires pecified in 11 U.S.C. § 362(b)(19).	nt pla	ans, as specified in	\$_	0	.00_	
42.	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Co	ору	line 38 here=>	\$	5,083	.49_	
43.	Deduction for special circumstances. If special circumstances justi and you have no reasonable alternative, describe the special circums expenses. You must give your case trustee a detailed explanation of circumstances and documentation for the expenses.	stan	ces and their				
Des	scribe the special circumstances		Amount of expens	se			
		¢.	0.0	00			
		- Ф		_			
		_ \$	0.0	00			
		\$	0.0	00			
				Cop	oy ₉ => \$	0.00	
44.	Total adjustments. Add lines 40 through 43.		=> \$_		5,083.49	Copy here=> -\$ _	5,083.49
45.	Calculate your monthly disposable income under § 1325(b)(2). S	Subtr	ract line 44 from line	e 39).	\$	0.00
Part 3	Change in Income or Expenses						
46.	Change in income or expenses. If the income in Form 122C-1 or the changed or are virtually certain to change after the date you filed you your case will be open, fill in the information below. For example, if the your petition, check 122C-1 in the first column, enter line 2 in the sec	ır ba e wa	inkruptcy petition and ages reported incre	nd c ase	luring the time d after you filed		

Official Form 122C-2

Form

Line

Date of change

Increase or

decrease?

Amount of change

increased, fill in when the increase occurred, and fill in the amount of the increase.

Reason for change

Debtor 1 Debtor 2	RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that th	he information on this statement and in any attachments is true and correct.
	/s/ RAFAEL M. CARO ADORNO RAFAEL MONSERRATE CARO ADORNO Signature of Debtor 1	X /s/ MARIA E. CANCEL RODRIGUEZ MARIA ESTHER CANCEL RODRIGUEZ Signature of Debtor 2
Date	July 31, 2023	Date July 31, 2023

MM / DD / YYYY

MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	oter 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
+	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Puerto Rico

In re	RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTOR	RNEY FOR DE	BTOR(S)

		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENSAT	TION OF ATTORN	EY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce paid to me within one year before the filing of the petition in babehalf of the debtor(s) in contemplation of or in connection with	nkruptcy, or agreed to be p	aid to me, for se		
	For legal services, I have agreed to accept		\$	0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	☐ Debtor ☐ Other (specify):				
3.	The source of compensation to be paid to me is:				
	☐ Debtor ☐ Other (specify):				
4.	☐ I have not agreed to share the above-disclosed compensation	n with any other person un	less they are me	embers and associates of my law firm	n.
	☐ I have agreed to share the above-disclosed compensation wit of the agreement, together with a list of the names of the per				ру
5.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspects o	f the bankrupte	y case, including:	
	 a. Analysis of the debtor's financial situation, and rendering ad b. Preparation and filing of any petition, schedules, statement of c. Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on household 	of affairs and plan which me confirmation hearing, and a to market value; exem needed; preparation ar	ay be required; any adjourned h ption plannin	earings thereof;	
6.	By agreement with the debtor(s), the above-disclosed fee does n Representation of the debtors in any discharg any other adversary proceeding.			nces, relief from stay actions o	r
	CER	TIFICATION			
ban	I certify that the foregoing is a complete statement of any agreem kruptcy proceeding.	nent or arrangement for pay	ment to me for	representation of the debtor(s) in th	is
	July 31, 2023	/s/ Milagros Rivera	Rivera		
-	Date	Milagros Rivera Riv	era	_	
		Signature of Attorney			
		MILAGROS RIVERA PO Box 50823	L		
		Toa Baja, PR 00949			
		Fax:			
		lcda.riveramilagros	@gmail.com		
		Name of law firm			

United States Bankruptcy Court District of Puerto Rico

In re RAFAEL MONSERRATE CARO ADORNO MARIA ESTHER CANCEL RODRIGUEZ Debtor(s) Case No. Chapter 13

VERIFICATION OF CREDITOR MATRIX The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.		
Date: _	July 31, 2023	Signature of Debtor /s/ MARIA E. CANCEL RODRIGUEZ MARIA ESTHER CANCEL RODRIGUEZ Signature of Debtor

AMERICAN ENTERPRISES PO BOX 610 Germantown, WI 53022

BANCO POPULAR DE PR PO BOX 362708 San Juan, PR 00936-2708

BOMBARDIER/CBNA 5800 South Corporate Place Sioux Falls, SD 57108

IRS PO BOX 8202 Philadelphia, PA 19101-8202

ISLAND FINACES PO BOX 71504 San Juan, PR 00939

LUMA ENERGY REVENUE PROTECTION PO BOX 364267 San Juan, PR 00936

ORIENTAL BANK PR PO BOX 195115 San Juan, PR 00919-5115

PERFORMANCE FINANCE 1515 W 22ND STREET, SUITE 100W Oak Brook, IL 60523

PR TELEPHONE PO BOX 70367 San Juan, PR 00936-8367

THE HOME DEPOT 5800 SOUTH CORPORATE PLACE Sioux Falls, SD 57108

WAKEFIELD AND ASSOCIATES PO BOX 50250 Knoxville, TN 37950-0250